

PTO/SB/121 (10-00)

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Request for Customer Number (PTO/SB/125) submitted herewith.							
in the following listed application(s) or patent(s):							
Patent Number				Patent Da		U.S. Filing	
(if appropriate)		Application Number (if a		(if appropr	iate)	Date February 14, 2002	
		10/074,235					
					(check c	(check one)	
Typed or Printed Name	Arthur R. Crawford					Applicant or Patentee	
Signature	Ush C. Coff					Assignee of record of the entire interest. Statement under 37 C.F.R. §	
Date	September 8, 2003					3.73(b) is enclosed. (Form PTO/SB/96)	
Address of signer: 1100 North Glebe Road, 8 th Floor Arlington, VA 22202						Attorney or Agent of record	
	_		í			25,327	
NOTE: Cianatura	all the inventors of an	pignoon of rocard of the or	ntiro interest e	thoir represent	ativo(s) are r	(Reg. No.)	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*							

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Assistant Commissioner of Patents, Box CN, Washington, DC 20231.

forms are submitted.

NITED STATES PATENT AND TRADEMAK OFFICE

In re Patents

KOJIMA et al

Serial No. 10/074,235

Filed: February 14, 2002

Title:

DAMPER AND AUTOMOBILE

Fees are attached as calculated below:

Chup Art Unit: 3683

Examiner: Schwartz ...

Atty Dkt. 1207-93 C#

Date: September 8, 2003

HAVING THE DAMPER

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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

□ Correspondence Address Indication Form Attached.

Total effective claims after amendment minus highest number previously paid for 20 (at least 20) =\$ 18.00 \$ 0.00 Independent claims after amendment 0 minus highest number previously paid for 3 (at least 3) =Х \$ 84.00 \$ 0.00 If proper multiple dependent claims now added for first time, add \$280.00 (ignore improper) \$ 0.00 Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) (\$110.00/1 month; \$410.00/2 months; \$930.00/3 months) \$ 0.00 Terminal disclaimer enclosed, add \$ 110.00 \$ 0.00 First/second submission after Final Rejection pursuant to 37 CFR 1.129(a) (\$750.00) 0.00 Please enter the previously unentered Submission attached Subtotal 0.00 If "small entity," then enter half (1/2) of subtotal and subtract -\$ 0.00 ☐ Applicant claims "small entity" status. ☐ Statement filed herewith Rule 56 Information Disclosure Statement Filing Fee (\$180.00) \$ 0.00 Assignment Recording Fee (\$40.00) \$ 0.00 Other: Information Disclosure Statement, PTO-1449, references, search report 0.00 TOTAL FEE ENCLOSED \$ 0.00

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

1100 North Glebe Road, 8th Floor Arlington, Virginia 22201-4714 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

ARC:eaw

NIXON & VANDERHYE P.C.

By Atty: Arthur R. Crayford, Reg. No. 25,327

Signature:

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